Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM			Application Number	er	09/841,974			
			Filing Date		April 24, 2001			
FOR	IVI		First Named Inven	tor	Terry Lee	Goode		
			Art Unit		2128			
(to be used for all correspondence after initial filling)			Examiner Name		Fred O. Ferris, III			
Total Number of Pages in This Submission 19			Attorney Docket N	umber	003921.00	011	フ	
		ENCLO	SURES (check all tha	at apply)			_	
Fee Transmittal Form Drawing(s		3)		After Allowance Communication to TC				
☐ Fee Attached ☐ Licensi		Licensing	-related Papers		Appeal Communication to Board			
		Petition			of Appeals and Interferences  Appeal Communication to TC			
Amendment / Reply						Notice, Brief, Reply Brief)		
After Final		Petition to Convert to a Provisional Application		Proprietary Information				
Affidavits/declaration	ı(s) [		Attorney, Revocation f Correspondence Add	torney, Revocation Correspondence Address		Status Letter		
Extension of Time Request			Disclaimer		Other Enclosure(s) (please identify below):			
Express Abandonment Request		Request for Refund						
		CD, Number of CD(s)						
☐ Information Disclosure Statement		□ Landscape Table on CD						
Certified Copy of Priority Document(s)		Remarks						
Reply to Missing Parts/		Please charge any fees that are necessary to maintain to the pendency of this application, including any fees under 37 CFR §1.16 or §1.17, to deposit account						
Incomplete Application		number 19-0733.						
Reply to Missing Parts under 37 CFR1.52 or 1.53								
under 37 CFR1.52 0	or 1.53							
	SIGNA	TURE OF	APPLICANT, ATTO	RNEY, O	RAGENT		_	
Firm		Banner & Witcoff, LTD.						
Signature		s/Thomas L. Evans/s						
Printed Name		Thomas L. Evans						
Date		February 5, 2007 Reg. No.			35,805			
	(	CERTIFICA	TE OF TRANSMISS	SION/MAI	LING			
I hereby certify that this cor Service with sufficient post Alexandria, VA 22313-1450	age as first	class mail i						
Signature								
Typed or printed name					Date			

This obtained information in required by 37 CFR 15. The information is required to obtain or retain a benefit by the public which is to the (and by the LISPTO) to crosses) an application conferentiality is generated by 38 LISPC 122 and 37 CFR 11 and 11.4, This collection estimates for 15 translates comprehe including pathering, preparing, and submitting the completed application form to the LISPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete the form and/or suppersions for reducing this buttoner, should be enter to the Clint formation Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-4360, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-4450.